

POSITION	INITIALS	ID NO.	DATE
	<i>AS</i>		<i>10/10/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		<i>5</i>	<i>1019-110</i>
FORMALITY REVIEW	<i>CH</i>	<i>71632</i>	<i>11/17/00</i>
RESPONSE FORMALITY REVIEW		<i>71632</i>	<i>1/26/01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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